

THE  
BOSTON MEDICAL AND SURGICAL JOURNAL.

VOL. XXIX.

WEDNESDAY, DECEMBER 27, 1843.

No. 21.

CHEMISTRY, APPLIED TO THE FOOD OF MAN.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—When you may have the necessary space in your valuable periodical, I shall be obliged by the insertion of the following paragraphs from my contemplated work on the *Institutes of Medicine*.

4. The beginning of organization is in the vegetable kingdom, which is the ultimate source of nourishment to animals.

5. From the foregoing law (4) arises the great fundamental distinction between plants and animals; that the former subsist on the elements of matter, whilst the latter are nourished by these elements in an organic state.

6. The precise analysis of the most simple organic compound, solid or fluid, is very difficult, and always liable to doubt.

7. If an animal compound be decomposed, the re-union of the elements into an animal substance requires the agency of vegetable and animal organization; and, not only so, but nothing can re-produce any given animal compound but the precise part of the same species of animal which gave origin to the part so decomposed.

8. Plants, it is true, derive much of their nourishment from organic compounds, but, before they can be appropriated to the uses of plants, the organic compounds must be first subjected to chemical decomposition through the influence of extraneous agents, and are only taken into the organization of the plant in the state of mineral substances; and, even then, all binary combinations (29) must be decomposed before the renewal of organization can begin. Just the reverse of this, however, obtains with animals, however the elements may be subjected to changes amongst each other, or to the separation of some from compounds embracing more than three in intimate union. There is never present, therefore, in the animal organization, as a source of supply to that organization, any mineral substance; for, whatever mutations the materials of supply may undergo, their elements always exist in a state of intimate ternary combination, at least, which is the most simple of organic compounds, and can never constitute a mineral or inorganic substance.

9. Hence (8) the great fallacy of attempting, by the analysis of food, to indicate the proper sustenance of man. It is founded upon a wrong conception of the economy of vegetable life, and thence reasoning from a

mistaken coincidence of principles (which exist in the two organic kingdoms in a strikingly modified state), to their more analogous results.

Since, however, plants subsist upon mineral substances, the chemist may successfully indicate those inorganic and organic compounds, which will yield to any given species of plant (whose general elementary composition may be more or less ascertained), the elements that go to its nutritive economy. But, from the fundamental distinction between plants and animals (5, 8), it is obvious that no such thing can be done in relation to the latter. No better practical proof of this can be wanted than the perfectly indigestible nature of many compounds which contain the requisite elements. Such compounds, upon the chemical philosophy, include many virulent poisons in the vegetable kingdom; aye, and many of the stones whose binary compounds embrace numerous elements (29). We need not, indeed, go any farther than the recent fallacies of Dr. Beaumont, in his direct experiments upon the gastric juice, conducted within the living stomach itself (620), to show that the whole of this subject of human nutriment must be left to natural experience. Consider, also, the well-grounded maxim, that "what is meat to one may be poison to another." And, again, consider that 1000 Abyssinians subsisted for two months upon gum Arabic alone; that the Nomade Moors live almost exclusively upon gum—the Californians and Atlantans upon acorns; that emaciated individuals have recovered their flesh whilst subsisting exclusively upon arrow-root; besides many other analogous examples which may be found in my *Medical and Physiological Commentaries*, Vol. I., p. 692—698. In many of these cases, other organic substances must, of course, be taken along with water, or through other media which are not sufficiently obvious to engage attention.

10. The whole of the foregoing distortion of Nature has proceeded directly from the laboratory, and has been seized upon by physiologists as a precious substitute for all that accumulated knowledge which had been supplied by the endless variety of natural phenomena. But, amongst those phenomena there are some, besides the foregoing, which appear to have escaped the consideration of all, and to which it would seem that the chemical philosophy must yield. I shall, however, mention but one, which will readily suggest an ample variety of a similar nature.

I say, then, it has not occurred to the chemical physiologist, that the elementary composition of animals is about alike (at least in all mammalia), since he has restricted his experimental observations on food nearly to man alone. Now, the composition of all mammalia being alike, at least to the chemist, it should follow, I say, upon his premises, that what is suitable food for a horse should be equally good for man, and *vice versa*. The dilemma need not be farther indicated.

MARTYN PAINE.

New York, Dec. 1, 1843.

## ASTHMA PRODUCED BY IPECAC.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—I have observed in a late No. of your Journal, a communication from Uriah Turner, M.D., entitled "Asthma caused by Ipecacuanha," illustrated by his own case, in which he observes that "he has reason to believe that these effects are new to a majority of the profession." Having for a long series of years suffered most severely in a similar manner from these singular effects of ipecac., and having made them the subject of long and anxious reflection, I take the liberty of forwarding to you a brief statement of my experience and observation on this singular, and to me painful, subject.

Yours respectfully, &c.

Homer, N. Y., Dec., 1843.

ASHBEL PATTERSON.

I have been to some extent a dyspeptic from early life, but had not supposed there was a strong predisposition to disease of the respiratory organs. When about 20 years of age I had a catarrhal affection, which has so far impaired the sense of smell, that up to this time (a period of more than twenty years) I have not been able to perceive odors unless they were decidedly pungent. At the age of 25, I observed that I was subject to occasional paroxysms of sneezing: the attacks were sudden, and the convulsive effort was often painfully violent. Occasionally these paroxysms were accompanied with dyspnoea or suffocating sense of stricture at the chest, and a most distressing oppression at the precordia—and were always preceded by, and accompanied with, a most harassing titillation of the nostrils, and at times with nausea, and convulsive, but ineffectual efforts to vomit.

For a long time I was unable to account to myself for this singular and distressing state of affairs. At length, after having prepared an emetic of ipecac., mixed it myself, and administered it to a patient, I was attacked with the whole concourse of symptoms enumerated above. Each one was marked by peculiar violence. In a very short time, probably ten or fifteen minutes, I found myself laboring under a severe and convulsive paroxysm of asthma; the danger of suffocation seemed imminent in the extreme. I sought relief in the open air. During my ride home, the oft-repeated and convulsive paroxysms of sneezing were almost sufficient to throw me from my saddle. These symptoms, like other similar attacks, lasted about two hours, and gradually subsided, with cough and expectoration.

It was during this paroxysm that the idea first suggested itself to my mind that these singular attacks were produced by inhaling the powder of ipecac. I taxed my memory in regard to previous asthmatic attacks, and I could recollect no instance of their occurrence without a previous exposure to the influence of this, to me, extraordinary agent. The idea was to me entirely new; but the sad recollection of previous exposures and suffering, convinced me that the idea, however novel, was nevertheless true.

I have since used many precautions to avoid its deleterious effects; but the constantly recurring necessity for its use, in a country practice,

has given me too many opportunities of testing, by painful experience in my own person, the potency of its influence in exciting asthma in a class of constitutions of peculiar idiosyncrasy. For a long time I supposed that inhaling the powder was necessary to produce these effects; but I have since learned that swallowing it in tincture or infusion will produce similar but not as violent results.

It is astonishing, I had almost said incredible, how small a quantity of ipecac. inhaled, will produce the most sudden and violent paroxysms. About four years since, a clerk in my drug-store scattered a small quantity of ipecac. on the counter, which he brushed off with a counter-brush; the doors and windows were open, and a current of air had passed through the store for half an hour before I entered it; in two minutes after my arrival, I was seized with a violent sneezing, followed almost immediately with a paroxysm of asthma which entirely disabled me for the day. But a few days since, a young man in my office was directed to transfer a quantity of ipecac. from a paper to a jar. I left the office for half an hour. On my return I was almost instantly attacked with one of the most fearful paroxysms that I have ever experienced; the extreme sense of suffocation, oppression at the precordia, a most withering and exhausting nausea, convulsive but totally ineffectual efforts to vomit, attended with simultaneous spasms of the diaphragm and muscles of the chest and abdomen, produced altogether a state of suffering which defies description. In each of these instances the quantity of ipecac. inhaled must have been infinitely small.

That these effects of ipecac. do not depend invariably on the irritating properties of the powder when inhaled, but on idiosyncrasy, seems to be established by the following circumstances. In the summer of 1841 I had a long course of bilious fever. The attack was marked by no particular symptom of disease of the lungs; but as soon as I commenced the use of ipecac. or Dover's powder as a febrifuge, I had a convulsive and harassing cough and dyspnoea; every effort to speak was interrupted by a spasm of the muscles of respiration; and a sense of sinking and oppression of the precordia, which constituted, in my opinion, the climax of human suffering. For a long time the agency of ipecac. in producing these symptoms was not suspected (as the utmost care was taken to prevent my inhaling the powder); but they continued with unabated violence, until I discontinued the use of ipecac. in every form.

The predisposition to asthma was unquestionably produced by the early catarrhal affection to which I have alluded; and its ultimate development depended entirely upon long-continued and repeated exposures to the influence of ipecac.; but when this predisposition had become established, other exciting causes would produce a paroxysm, but no cause has yet excited such violent symptoms as ipecac.

A peculiar state of the atmosphere will produce it, and a long continuance of this state will cause it to return periodically. The month of October, 1842, was one of the most pleasant months of the season; the days were sunny and the air mild; the nights were cloudless; but from the numerous streams in this valley there rose a dense fog which hung



upon their banks until a late hour in the morning. Exposure to or inhaling this fog invariably caused a paroxysm of asthma, which lasted two or three hours, and terminated with cough and expectoration. After a few exposures to these fogs, the attacks became periodical, making their onsets with singular exactness, invariably within twenty minutes of 4 o'clock in the morning, waking me from refreshing sleep to undergo all that is dreadful in this most suffocating affection. These paroxysms were so severe as to render a recumbent posture insupportable; but they were in a great degree free from that sense of sinking, nausea and spasm, which accompanied those caused directly by ipecac. These diurnal paroxysms continued without a single intermission until the 7th of November, when a violent storm of rain, sleet and snow wrought an entire change in the state of the atmosphere, when they suddenly ceased. Thus

" Chill November's surly blast "

operated as a charm in relieving me from attacks, which from their uniformity and severity rendered life almost a burthen. In this respect, as well as in many others, there seems to be an essential difference between ordinary asthma and that form of the disease produced by ipecac. It might be interesting to trace out and define these points of difference; but having extended this communication already to too great a length, I shall leave its further consideration for some future occasion.

#### EXPERIMENTS ON MILK.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—In the year 1825, soon after commencing the practice of medicine, happening to see it asserted in the old Edinburgh Dispensatory, as a scientific fact, that milk was changed or rendered acedcent by the influence of thunder and lightning, and knowing such to be the popular belief, the following experiments were instituted to determine the truth or fallacy of the opinion. I supposed it would require no experiment to prove that thunder, which is only the report of the electrical explosion in the air, mere sound or noise, could not produce a chemical change in milk.

1. A common glass tumbler, half filled with milk taken from the cow three hours previously, was positively electrified with a good machine.

2. A similar quantity of the same mess of milk was negatively electrified. Each of these parcels of milk was electrified for the space of fifteen minutes, but not the least change in the taste or appearance was produced.

3. Another portion of the same mess of milk was submitted to a succession of shocks from a Leyden phial; and was made a part of an electrical circuit, receiving through it a number of shocks, but without undergoing the slightest change in taste or appearance. If the electrical fluid of the atmosphere has an effect on milk, it must be in one of the foregoing methods, because these are the different modes in which it operates to produce the phenomena of thunder and lightning. The electrical fluid is not known to operate upon bodies in any other way.

4. The three tumblers of milk which had been electrified were set on a table in a room where the thermometer stood at 88 deg., and beside them was placed a fourth tumbler half filled with the same mess of milk, but not electrified. In five hours the milk in all the tumblers began to change or grow acescent, but the milk which had been electrified changed no sooner than that which had not. These experiments render it evident that lightning, which operates in the same way as the electrical fluid excited by a machine, has no effect on milk.

5. Four six-ounce phials filled with new milk, two closed with wax and two left open, were placed in a small tub of water warmed to 90 deg. by the thermometer, and kept to this degree of heat by successively adding hot water until the milk became changed, which happened in seven hours. The heat of the room was 60 deg. The milk in all the phials became acescent in about the same time, showing that contact with the air has no influence in effecting the change. This experiment was tried a number of times, varying the heat of the water from 80 to 90 deg., with nearly the same result. When the heat ranged between 80 and 90 deg. the milk would sour in about eight hours; when it ranged between 90 and 98 deg., the milk would change in six or seven hours. This experiment proves not only that heat is the sole cause of the souring or decomposition of milk, but that a certain degree of heat will effect the change in a certain length of time. Nearly all the thunder and lightning happen not only in the hottest weather, but in the latter part of the day. Suppose the heat of the atmosphere to be 85 deg. by the thermometer, and milk to be taken from the cow at six o'clock in the morning, according to the fifth experiment it will become sour by 1 or 2 o'clock in the afternoon, about the time when thunder showers begin to appear. This coincidence in the appearance of thunder showers and the change in milk, has originated the universal belief that thunder and lightning are the cause of the change.

In making cheese, the milk is always warmed to about blood heat to hasten its transformation into curd. It must very often have been observed that when milk is nearly acescent it will suddenly change into curd before it can be heated to the boiling point. If it will bear being boiled, it will keep much longer for it. People should have no apprehension of the influence of thunder and lightning upon their milk; only give it a cool place, and it will keep as long in a thunder storm as at any other time. I believe, however, that the milk of cows in warm, still, cloudy and muggy weather, is not so well elaborated or animalized when it comes from the animal as in cooler, drier and clearer weather, and therefore sooner becomes sour. Animals themselves as well as all animal secretions are manifestly affected by certain states of the atmosphere. Milk becomes acescent the soonest in those states of the atmosphere in which all animal substances become putrescent. But milk, although rendered acescent, is a long time in becoming putrescent, owing doubtless to the antiseptic nature of the acid which is developed in the process of souring. This acid developed in the change of milk appears

to be both the cause of the change of the milk into curd, and of preserving it from putrefaction.

It is not a little singular that one degree of heat should so speedily effect the change of milk, and that a little higher degree should preserve it from this very change. This difference between the effects of a blood heat and a boiling heat, deserves particular attention. The process of boiling tends to preserve all dead animal substances, while a blood heat or a little less tends to render them putrid.

Milk in a heat of 80 or 90 degrees, as we have seen, becomes essentially and chemically changed in its properties in the space of seven or eight hours, while in a temperate atmosphere it will keep two or three days. If the heat of our atmosphere can produce such an essential change in the properties of milk in so short a time, must it not produce corresponding changes in the fluids of the living animal system? It is true that the fluids of the body are generally maintained at a heat of 98 deg., but a high heat of the atmosphere will maintain the heat of the body at a fever heat, which is known to accompany, if it does not cause, a change in all the fluids of the body. The cholera morbus always and everywhere prevails in the same state of the atmosphere, in which milk soonest changes into curd. Children, especially, feel the malign influence of such an atmosphere, particularly nursing children. The effect of the heat of the atmosphere in changing the properties of milk, is the nearest approach we can have in unfolding the changes which may take place in the living animal fluids.

Supposing that a still, warm, cloudy, muggy atmosphere has a similar effect upon the chyle in the intestines as it has in changing the properties of milk which it nearly resembles, would it not originate disease, and would not that disease be a disease of the stomach and bowels, a cholera morbus or a diarrhoea? A similar change in the properties of the bile may produce a yellow fever; or changes of a similar nature induced in the blood may cause a plague. The stomach and bowels evidently labor under a higher degree of heat in a hot season than in a cool season, as is manifested by the greater degree of thirst, and profuse perspiration which must require a higher degree of heat to support it. Nursing children, in warm, muggy weather, labor under a two-fold danger: the milk of the mother is not so perfectly elaborated, and the chyle which is produced from it in the bowels of the child is more liable to run into decomposition. No wonder, then, that the cholera infantum should sweep off such numbers of children. If a high degree of atmospheric heat produces so speedy a chemical change in new milk, what must be the effect of a hot room upon a woman in child-bed when the milk is just beginning to flow? Is there not great danger in so overheating the breasts as to occasion a chemical change of the milk while yet in the lactiferous ducts, thereby inducing an inflammation of these organs? I have always suspected that a coagulation or a chemical change of the milk was the cause of the inflammation of the breasts, and the influence of heat upon fresh-drawn milk gives new confirmation to the conjecture.

D. B. SLACK.

Providence, R. I., Dec. 14th, 1843.

## INSTRUMENTAL MANAGEMENT OF DISEASED SPINE.

To the Editor of the Boston Medical and Surgical Journal.

SIR,—I was reading in your Journal, some time since, an attempt to prove the utility of the mechanical treatment, or, in other words, of brass rachets and corslets, in cases of spinal curvature, by A. Abbe, M.D.; and, at a later date, an article accredited to R. Capen, M.M.S.S., in which this gentleman testifies to his belief that these instruments were the means by which a member of his own family had been cured of this deformity; in proof of which, he cites the case.

It thereupon occurred to me that an article which I had noticed a year or two since in a weekly journal published in Worcester, and which was contributed to its columns by Dr. Davis, of that town, was exactly in point, and contained an all-sufficient refutation of all that either of the above-mentioned gentlemen, or any one else, could say on this subject—in other words, a death blow to this revolting system of treatment, a system which the author of the first-mentioned article is, as far as my knowledge extends, the sole practitioner. The whole of the article from which I extract is well worthy of insertion, as it contains arguments fully sufficient to overthrow Dr. A.'s thoroughly unsound theory in relation to muscular antagonism, as well as strongly bearing upon the case which Dr. C. has reported.

At this time, however, I will only trouble you with the following extract. I would, in passing, remark, that Dr. C. has not, in his communication, followed the rule usually laid down for themselves by all true lovers of science and truth. It is the custom for *such*, more particularly in a matter which concerns medicine or surgery, to allow a sufficient length of time to elapse, for the final issue to have been fully attained, before representing to the public a successful result, and publishing the case by which they considered this result to have been established. What should we think of a surgeon, after an operation, the reduction of a fractured limb, for example, who should, whilst the patient was yet under treatment, and before even the splints were removed, show himself willing to lead his professional brethren into error by publishing the *case* as one in which the patient had improved "so fast and ultimately so effectually." Still greater, then, would be our surprise, if in only the fifth line preceding he had stated his conviction that in "*proper time*" the case would be completed. As this cure is brought forward, in one line, as an instance of an effectual cure, by the means of brass rachets and corslets, and in another line of a cure *to be* completed by the same means, and in which the patient was, as Dr. C. asserts, "gradually convalescent," we can arrive at no other conclusion than that she was still under treatment, and still encased in the brass splints. Is it therefore consistent with the accustomed accuracy of a medical gentleman to report *such* a case, however well convinced *himself* of the apparent and temporary benefit which had been attained, as one in which a certain method of treatment was ultimately effective?—The following is the extract above alluded to.

"As the evidence of those who have experienced the sufferings, and are witnesses in their own persons of the permanency of any apparent benefit derived from mechanical treatment, ought to be conclusive, I will make an extract from one among many letters which I have received upon the subject. It is from a young man who has been through the process mentioned, and who has noted with accuracy the effect upon others. The results agree perfectly with those of the English author quoted. He says—'I have seen many cases under Dr. ———'s treatment. So far as I know, none now wear their corsets; none have been finally benefited, either in health or figure; all have experienced very unpleasant feelings of weakness and languor, on first going without their corsets; none have preserved an erect form; their present figure is as bad as ever; they denounce Dr. ———'s treatment as an inefficient system of useless torture. Among the dozens of cases I have seen, I know of none of restoration, and never expected to see a cure after I had obtained an insight into the plan of treatment. Day after day, month after month, I have seen the dressings applied and tightened; I have seen the patient suspended by the head upon the inclined plane, and upon the gallows; I have seen their *backs excoriated*, and *sores* upon them for a long time; I have seen their arm-pits cut into by the brass, till every motion of the arm was painful; I have heard their groans and seen their bitter tears, under the operation of the mechanical system; but I have never seen a crooked spine straightened. True, I have seen many persons under that treatment who showed a pretty good form with their brass corsets on, whose health seemed to be improved, whose expectations were high, and who manifested a strong confidence in the system. But after I had watched the operation of the plan for some months, I became satisfied that time would show that the improvement was but temporary, and the expectations fallacious; and experience has confirmed this belief.'

"To this might be added extracts from many more letters, from different individuals, all of the same tenor. The closing remarks above quoted throw some light upon a point that is of much consequence. While patients are under treatment by compression and extension, they grow in height, and improve, consequently, in figure; their hopes and expectations are raised to perfect confidence; they can inform their friends of this favorable change, which is sufficient to induce others to make the attempt to recover from their deformity, only to meet with the same disappointment; for, after they have relinquished this system of compression and extension (no matter how long it may have been practised), the muscles having lost their strength, the trunk of the body being dependent upon its artificial support, begins to settle down into its former position; the shoulder presses more and more against the corsets, the arms rest upon the top of them, the suffering and the deformity increase, the hopes of the patient and friends are gradually blighted, while all confidence is lost, and the suffering compels them to throw off their corsets in despair; then is realized all that my correspondent has described; then will they call it an 'ineffectual system of useless torture.' That there

may be some cases where corsets are worn without these results, and others where they have been worn and then abandoned, and yet retain their form, I have no doubt. For they may be applied where a curvature does not exist, more readily than where it does. They can be applied for other diseases of the spinal column, and if they are not kept on so long as to destroy the tone of the muscles, no very serious evil will follow, no distortion will take place. Some of these cases might be called cases of curvature in embryo, and therefore reported as instances of a perfect restoration by mechanical means; but the history of the disease would prove it to be anything else besides a curvature. A common affection thus treated, is spinal irritation, or an affection of the spinal cord."

From the above extract it will be observed that for the first few months buoyant hopes and high-raised expectations of recovery reign predominant in the minds of the patients and their friends, which are only what might be expected under similar circumstances. How painful, even to agony, then, must be the revulsion of disappointment!

J. H. W.

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#### DR. PARKER'S CHINESE HOSPITAL.

[A WRITER in the Christian Observer has furnished a very satisfactory account of the institution over which Dr. Peter Parker, the bold American surgeon, presides with an increasing success and reputation. It occurs to us to inquire what was effected in Boston some two years ago by a few philanthropic gentlemen, who were disposed to aid Dr. Colledge, an English surgeon? He visited this city about that period for the purpose of obtaining assistance for the organization of a hospital in Canton.]

After visiting several of the streets and shops, and some of the Hong merchants. &c., I called upon Dr. Parker, and his lady, who is residing at Canton with him. At his invitation, I went through his hospital with him. It is a large building, given to him by Hongua, the chief Hong merchant, rent free; but it is not very commodious in appearance to one who has seen our hospitals at home—though the best the place affords. I entered a large room in which there were about seventy Chinese men and women, many of whom had been operated upon a day or two before, for diseases of the eyes. That morning was not one of the regular admission days, but a Mandarin lady and a little girl were allowed to enter. The lady had feet about as long as your thumb (two and a half inches), was well dressed, but not at all remarkable for any attempt at display. She was partially blind. Whilst the doctor was speaking to her, he showed me his books, where he wrote down her name, age, sex and occupation, in Chinese characters; and the name of her disease in the usual medical form. He then wrote a prescription, marking it with the number designating the patient, which in this case was 10,666, which he put aside, so that at the next examination he could refer to her previous treatment.

He is assisted by two or three Chinese, who appear to have a good

deal of his confidence, having charge of the drugs, and the minor matters relating to the patient.

The little girl came next. She was a pretty little thing, but was suffering from abscesses in the mouth, arising from decayed teeth. Both the lady and the little girl had their faces highly painted, to increase the fairness of the complexion, although they would be considered white persons anywhere. Several Mandarins were in the room, who had likewise received the doctor's kind offices.

I accompanied the doctor in a walk through the Hospital, and saw several of his patients who had been operated on for cataract: their eyes were covered with shades, some of which the doctor raised, and holding up one, and then two fingers before them, they would nod and mention the number as he changed them—showing the entire success of the operation; and the appearance of thankfulness which their countenances and exclamations exhibited, was most interesting.

One poor fellow had a large tumor cut from his body, just below his chest, and was not quite recovered when I saw him. When we entered the room, he raised his head, and said, *Chinchin* (the Chinese expression for wishing one well) to us all, raised his head, clasped his hands, and throughout the whole time we were there (except for a moment, when the doctor touched one of his wounds with caustic), his gestures indicated that he was more grateful than he could express. Another man had an enormous bony tumor on his jaw, which was to be a subject for a future operation. I saw many others, who were in the various stages, from having just come under the doctor's charge, to a state of convalescence—some of whom were in a most horrible condition, chiefly occasioned by these extraordinary tumors. When in Philadelphia, I felt rather disposed to think the accounts of Chinese diseases exaggerated—but from what I have seen, I do not now think words could give an adequate idea of the benefit the Chinese would derive from, or their necessity for, good medical assistance. My respect for the doctor and his benevolent mission, was greatly increased by my visit. I dined that day with Dr. and Mrs. Parker. The latter has been residing some months at Canton—being the only English lady there. She told me no objection is now made to their residing at Canton; but the curiosity with which a foreign woman is regarded by the Chinese renders it unpleasant to walk out—a crowd always collecting. She has received visits from several of the Hong merchants—one of whom remarked to his linguist, or interpreter, that she spoke just like a man. The Chinese women, receiving very little education, are not considered as equals in intellect to their husbands; that a sensible remark should come from a lady, was the cause of the China gentleman's surprise.

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#### COLCHICUM IN GOUT.

From Dr. A. B. Todd's new Work on Gout and Rheumatism.

It appears to me that colchicum may act in a two-fold manner: first, *chemically*, by producing some change in the urinary and hepatic secre-



tions, both of which it tends to increase in quantity and alter in quality ; and, secondly, it acts upon the nervous system, causing more or less depression, and on the mucous membrane of the stomach and bowels, exciting nausea, or vomiting, or purging, either separately or together. If employed in such doses as will produce only its chemical changes, it will, in strong constitutions, most favorably modify the gouty paroxysm, and certainly shorten its duration. If, on the other hand, it produce any of its irritant effects, it is likely to do more harm than good ; and therefore the dose should be diminished, or the medicine abandoned, if nausea or purging should come on during its administration. I have no doubt that a large share of the bad repute of this medicine is to be attributed to the indiscriminate and careless manner in which it is often prescribed ; and I would venture to suggest the following hints for the guidance of the practitioner in its employment.

1. Colchicum should not be given in the asthenic form of gout.

2. Colchicum should never be given at the outset of a paroxysm, nor until the bowels have been duly acted upon by mild purgatives.

3. The first doses of the medicine should be very small ; they may be gradually increased.

4. Colchicum should always be administered at first uncombined with any other medicine, until the practitioner has satisfied himself that it is not likely to disagree with his patient. And, indeed, there is always a disadvantage in administering this medicine in combination with others ; since it may become difficult, if not impossible, at times, to determine what effects should be ascribed to the colchicum, and what to the other ingredients.

5. It should not be administered so as to excite nausea, vomiting or purging. These effects should be regarded as indicative of the unfavorable operation of the medicine.

6. Colchicum may be regarded as acting favorably when, under its use, the urine is increased in quantity, a more abundant bile is discharged ; when the fæces, though solid, are surrounded by mucus, and the skin secretes freely.

7. The effects of colchicum should be carefully watched ; as, like digitalis and other medicines, it is apt to accumulate in the system.

The use of this medicine seems chiefly applicable to the sthenic form of gout, which occurs in robust constitutions, and in the prime of life ; but it is almost inadmissible in persons advanced in years, who have had several attacks, and in whom the malady would seem too deeply rooted to be influenced by the temporary administration of this remedy.

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#### CASES OF PULMONARY EMPHYSEMA AS A CAUSE OF DEATH.

By John H. Tripe, London.

CASE I.—J. Pearson, æt. 29, wine-cooper, rather addicted to drink, short, but stoutly made, was first seen by me three years since, when he was of

an earthy hue, and complained of cough and dyspnœa, which had troubled him more or less for some years, both being increased in winter, but especially the dyspnœa. About two years afterwards I again saw him : the dyspnœa had become constant, increased on exertion, or after meals ; palpitation, cough, usually with but little expectoration ; no wasting or œdema ; there were also constant headache, and frequent giddiness ; the countenance of a leaden tint ; the lips large and purplish ; lividity of the hands and nails ; and fulness of the external jugulars, which did not disappear on pressing the upper part of the vein. There were local signs of emphysema, bronchitis and dilatation, with hypertrophy of the right side of the heart. Roundness of the anterior part of the thorax ; sound on percussion very loud, except at the lower part of the sternum, where the dulness was more marked than usual. Respiratory murmur scarcely audible ; expiration longer than inspiration in the proportion of about three out of five ; but the ribs and diaphragm were longer in performing inspiration than expiration ; the rhonchi sibilans, gravid and mucous ; the first sound of the heart varied on each side, on the left being normal, and on the right shorter, sharper and clearer than natural ; no *bruit*. After a short time he returned to his employment, and continued so with but little interruption until the middle of last month, when he called on me, at which time the dyspnœa was much aggravated, the lividity increased, the pulse quick, small and oppressed. On the 28th, he was discovered by his friends insensible, as they called it, in bed. On my visit, I found him lying on his back, capable of being slightly roused ; pupils contracted, but sensible ; the pulse imperceptible at the wrist ; the heart's action feeble, fluttering and oppressed ; respiration very difficult, but not stertorous. The face leaden ; lips blue, and very large ; hand dusky, and nails livid. A dose of æther was administered. In an hour, the pulse having risen, he was bled, the pulse rising as the blood flowed ; sensibility returned, and he spoke to those around, the countenance, lips, hands and nails becoming less livid. From this time he gradually relapsed, all the symptoms returning, and he died in twenty-three hours after the bleeding ; stimulants having been administered by moistening his lips, for he resisted any attempt to introduce them into his mouth, even up to ten minutes before his death. A *post-mortem* examination refused in the most positive terms.

CASE II.—Miss Pearson (sister to the above), æt. 21, of a leucophlegmatic habit, applied to me on the 3d of May last, and gave the following history. She had enjoyed good health up to a fortnight previously, never having had any acute disease, except about a year ago, when she was confined to her bed with fever, and acute pain of the left side. The present attack commenced with cough, dyspnœa and feverishness, with expectoration of a yellowish sputa. On a local examination, there were bronchitic symptoms, the sound on percussion being unusually loud.

She was relieved, but not cured, by the treatment, and in July last again applied, complaining of constant dyspnœa, cough, palpitation, headache, &c. ; the countenance being cadaverous, but not purplish ; the lips

rather red ; the pulse small, soft, 100 ; the impulse of the heart weak, with local symptoms of emphysema, bronchitis, and slight dilatation of the right side, the latter not being well marked. From this time up to the end of September, when I ceased attending her, the dyspnoea increased, remaining permanent ; agitation of mind, a full meal, or any attempt at exercise, increased it considerably, causing violent fits of palpitation and cough, terminating with copious expectoration of frothy and thick yellowish fluid. She remained in this condition until the 29th of October, when her brother's death being communicated to her rather suddenly, she became worse, and a most profuse discharge of blood took place per vaginam, without pain, which continuing, Mr. Dyte was sent for, by whom she was attended for three days previously to her death, which took place rather suddenly, and without a struggle, her mind being perfectly calm and collected. After some trouble, permission was granted to examine the chest, which was done by Mr. Dyte and myself.

Old pleuritic adhesions of the upper lobe of left lung ; both lungs highly emphysematous throughout, the air-cells being much dilated, varying in size from a millet seed to that of a large filbert, the largest being found on the surface immediately below the pleura ; the cellular tissue was emphysematous, principally taking the course of the bronchial tubes. But little blood flowed on the section of the lung, and that fluid and black ; the smaller bronchial tubes were filled with a yellowish puriform fluid, thick and tenacious, much resembling the contents of a tubercular cavity, without any albuminous shreds ; a few crude tubercles were scattered through the left lung, but no cavities. The left side of the heart was thin and pale ; its parietes flaccid, and not containing any blood ; the right side was partially filled with black semi-coagulated blood ; the cavity of both the auricle and ventricle larger than of the left, and about half the thickness or a little more ; the blood contained in the large blood-vessels was black and fluid. An examination of the head was not allowed.—*London Medical Gazette.*

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## THE BOSTON MEDICAL AND SURGICAL JOURNAL.

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BOSTON, DECEMBER 27, 1843.

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*Natural Language—Phrenology and the New Systems of Philosophy.*—In Mr. Fowler's lithographic symbolical head and phrenological chart, which is on sale at the book-stores in Boston, there is represented on each of the scientific divisions of the skull, familiar to phrenologists, some transaction indicative of the natural language of the organ at that particular point. For example, *Veneration* is represented by the figure of a boy in the attitude of respect to an old man ; and further in the back ground, is a child in the humble position of prayer. These are impressive exhibitions of the function of this organ. Benevolence presents the good Samaritan. Secretiveness is illustrated by the picture of a cat in the act of

catching a mouse. Destructiveness, by a tiger destroying his prey. Sublimity, by a view of Niagara Falls. Acquisitiveness, by a miser counting money. Causality, by Newton watching the falling of an apple; and so on, through the whole range of the mental faculties.

How phrenology is to fare in the present rage for new systems of mental philosophy, cannot readily be determined. A mighty multitude of paying disciples are close upon the heels of a number of active leaders, who are individually ambitious of making a stir in the world. Unluckily for all of them, they have buckled on the armor of animal magnetism, as the most convenient machine for throwing dust into the eyes of the greatest number of people at the same instant. But since the trickery of the thing has been detected, the professors of the new systems contrive to skulk behind great words, which are used as fortifications whenever accused of being Mesmerizers in disguise. One has discovered that *pathetism* has the talismanic property of solving all problems either in the physical or moral world. It makes impressible pious young ladies sing at the Masonic Temple with their eyes shut, and follow the reverend but blind leader like a subdued spaniel. In fine, it tears phrenology all to fritters, for without treating with absolute contempt all other methods of unravelling the mysterious operations of the mind, *pathetism* could not have even a transitory existence.

Next comes Neurology—and pray what is it? Let those who are capable of defining its position, do so, and very much oblige a host of inquirers, who see nothing in its scheme of developments but animal magnetism run mad, whilst phrenology, on which it had a feeble hold, gets treated quite shabbily by the new converts.

Subdivisions of animal magnetism into fine threads, are constantly presented to wonder-struck people, whose astonishment and credulity bear an exact ratio to the impudence of the discoverer. Just enough of phrenology is dragged into an exhibition to demonstrate the utter ignorance of all parties in the matter, and hence that which has employed the high powers of Gall, Spurzheim and Combe, gets shamefully degraded and abused by knaves and mountebanks.

Happily for science, there are men capable of appreciating truth, and disengaging it from the mass of falsehood and trickery which is sought to be incorporated with it. Phrenology, after undergoing a variety of degradations by being mixed up and compounded with the rarishow exhibitions of animal magnetism, will by-and-by be resuscitated, and shine with its former splendor; and will one day have place with the exact sciences, where it legitimately belongs, but from which it has been kept away by the enemies of its discoverers.

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*Gout in Females.*—It would be interesting and of some importance to ascertain whether females ever have the gout. In the records of disease, especially of cases, can a distinct case of gout in a woman be referred to? We have no recollection of having heard or read that females were not liable to the disease. It might be gratifying to have the question distinctly answered at once. There is no reason why females should not be subject to all the pains and penalties of men, if they violate the laws of the animal economy. Nor can we understand why they might not inherit the gout from some gouty ancestor, as readily as their fathers

or brothers, who are sometimes the unhappy victims of an ancestor's maladies and bodily vices.

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*A Monster arrested.*—Western New York is familiar with the name of Dr. Beigler, a very celebrated homœopathic physician. He resided some time in Albany, but of late has dwelt in the city of Rochester. He has been arrested for attempting to commit arson, in order to defraud an insurance company out of \$6000. He attempted to run away, but was taken at the car office on a complaint for assault and battery on his wife. The lady was on the stand five hours, says the Atlas, and developed a series of cruelties. At one time he beat her so badly as to produce a miscarriage; at another treated her so severely, that to save her life, she consented to draw up and sign a paper, setting forth that she had been in the habitual practice of doing wrong, &c., after which she contrived to escape from the house. Beigler is a German doctor, say the papers, and was married to Mrs. B. about three years ago. Some of the property, about which considerable stir was made, by himself, has been found in one of his own trunks.

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*Removal of Dropsical Ovaria.*—Mr. Southam has published some remarks in the London Medical Gazette on the objections to this new surgical operation. With regard to the statistics of the operation, he states that previous to October last the number of cases in which the diseased ovarium had been extirpated was 19, and that 5 of these were fatal. He also gives a table of 20 cases of ovarian disease, in which paracentesis, hitherto the most effectual palliative, was performed, from which it appears that this operation prolongs life on an average for only 18 months and 19 days, and that one in five dies from the effects of the first operation. In conclusion he remarks, respecting extirpation :

"The operation is perfectly justifiable when the patient's sufferings are such as to make life a burden to her; when the symptoms of structural lesion of any important organs are absent; and when the constitution is suffering merely from functional derangement consequent upon pressure of the tumor on the neighboring parts. On the contrary, it ought not to be attempted when the well-known characteristics of malignant action are present; when the tumor is solid, uneven, and has been of rapid growth; when the glands in the vicinity are enlarged, and hard knots can be felt in different parts of the abdomen, or when there is distinct evidence of other organs being similarly implicated. Still less should it be undertaken until the surgeon, by varied and repeated examinations, is convinced of the existence of the disease. Nor must the rules which direct us as to the propriety of operating in other diseases, respecting the condition of the sexual organs, and the fitness of the patient's constitution to undergo so severe an operation, be overlooked. Considering that extirpation of the ovary is still in its infancy, there is every probability that as our experience increases it will, under proper restrictions, prove as successful as lithotomy. The surgeon will be thus enabled to restore to health individuals who must otherwise drag on a miserable existence for a considerable period. A glorious monument will be raised to the healing art through the improvement of surgical knowledge; and that boldness of

surgical energy, which the timid were but too ready prematurely to condemn, will be ultimately sanctioned by an enlightened and applauding profession."

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*Colony of Insane at Gheel.*—Some additional particulars respecting this Colony, which was described in this Journal a few weeks since, are found in a subsequent No. of the London Medical Gazette.

"The following is the result of the treatment, as far as the cures are concerned, for the year 1840. On a total of 678 patients (353 men, 325 women), 40 (15 men, 25 women) were cured."

"This number, so small with reference to the numerical quantity, is enormous as regards the *quality*, if I may so express myself, of the patients. For it must not be forgotten, that up to this day, with very few, if any exceptions, there have only been sent to Gheel insane persons who had previously been subjected to a treatment more or less prolonged; either in hospitals, or in their families, and had been deemed beyond the resources of art, and declared *incurable*. I am well aware that in mental medicine the prognosis is far from being infallible; but when a disease has existed for several months, or even years, and no treatment has succeeded in modifying it, the prognosis is excessively unfavorable, even if it does not induce us to give up all hopes of recovery. Besides, the circumstance must not be overlooked, that, among the patients at Gheel, there is a considerable number of paralytics, epileptics, idiots, and imbeciles, who are all in a state of absolute incurability.

"As I have already said, not more than two years have elapsed since the colony at Gheel has received a certain organization. No doubt with time (if this be allowed it), this organization will produce the fruits there is reason to expect from it, especially if the ameliorations be introduced of which experience may subsequently demonstrate the necessity."

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*Hospital for Jews at Berlin.*—At a late session of the Municipal Council of the Russian Capital, the President of the body proposed a resolution conceived in these terms:—Considering the liberal aid which the Jews of Berlin have contributed during the last four years, to the different charities of the city, under the government of the Christians, and considering that they have amply supplied the wants of their own poor, whereby a great saving of expense has resulted to the people of Berlin, the Municipal Council orders that the sum of two thousand dollars be appropriated, out of the city's revenues for the current year, towards the construction of the hospital which the Jews of Berlin are now erecting for the poor of their own faith.

The proposition was adopted without discussion, and with unanimity, save one voice, and that a Jew, who was a member of the Council, and abstained from voting.

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*Goitre in Tartary.*—"I observed," says Lieut. Burns, "that these mountaineers (Huzaras), though some of them were living at elevations of 10,000 feet (the Koh i Baba mountains) were altogether free from that unseemly disease, the goitre, which I had observed in the same range, the Himalaya, eastward of the Indus, even below 4000 feet." Perhaps



bronchocele is a disease, he remarks, confined to lesser altitudes; an opinion held by many members of the faculty of the first eminence on the Continent, as mentioned in the Transactions of the Medical Society of Calcutta, by Dr. M. J. Brawley, of the Bengal army. That gentleman, however, in his treatise on the disease, which is founded on personal experience during a residence in the mountainous regions of Nipal, adduces facts that would lead to a contrary conclusion regarding its locality—which he states to be more general on the crest of high mountains, than in the valley of Nipal.

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*Causes of Hemorrhage after Delivery.* By C. W. LEVER, in Guy's Hospital Reports.—The author's object is to call attention to two predisposing causes of hæmorrhage, which are not generally recognized by obstetric writers, viz., diseases of the spleen and kidneys. In reference to the *first*, he has arrived at the following conclusions: "1. That in females affected with enlargement or disease of the spleen, the uterus is predisposed to dilate, and therefore admits of the effusion of blood into its cavity. 2. That the blood so collected coagulates, and excites considerable irritation, as marked by the accession of rigors, fever, &c. 3. That the fever so produced, in course of time (varying in different cases), assumes the intermittent type, especially when the patients have previously suffered from ague. And 4. That such intermittent fever is curable by the same remedies that are successful in the treatment of pure and uncomplicated ague." In regard to the *second* cause, he believes: "1. That labor occurring in patients affected with morbus Brightii is generally lingering. 2. That in such patients, although the fœtus and its secundines may be expelled by the natural uterine efforts, and the uterus may for a time appear to contract, yet that it is very liable to become relaxed, and distended with blood. 3. That in patients so affected, peritonitis of a more or less acute character is prone to occur." We recommend this paper to the careful notice of our obstetric brethren, whose attention cannot be too forcibly directed to the distressing occurrences of which it treats.—*Brit. & For. Med. Review.*

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*On Painful Affection of the Breast.*—In a memoir, published in the "Archives Générales de Médecine," for September, Dr. Rufz, of La Martinique, gives several interesting cases of the disease above-named, first clearly described by Sir Astley Cooper, under the name of "Irritable Tumor of the Breast," and to which the appellation of "mastodynia," or neuralgia of the mamma," is now generally applied. The eleven cases given or alluded to by Dr. Rufz seem all to refer to that form of the malady in which the neuralgic pains are accompanied by general or local induration of the mammary gland, which, no doubt, is by far the most frequently observed. Indeed, it is questionable whether ulterior observation will not show that the form of mammary disease in which the pains irradiate round a small or large induration of the glandular structure of the mamma, often increasing or diminishing, according as the induration increases or diminishes, and seldom following the course of the thoracic nerves, is perfectly distinct from that in which there is no induration of the mammary gland, but merely excessive pain, increasing on the slightest pressure. In his late work on Neuralgia, M. Valleix mentions a fact of



great importance in the diagnosis of intercostal neuralgia, viz., that generally speaking, pressure is not painful along the whole course of the nerve affected, as in most other neuralgiæ, but merely here and there; so that unless this circumstance be borne in mind, intercostal neuralgia may often be overlooked. Dr. Rufz tested two of his cases in the way mentioned by M. Valleix, but did not find the local painful points which ought to have existed had there been intercostal neuralgia, according to the latter physician. Had, however, all the cases in question been thus tested, and found to present the local pains along the course of the intercostal nerves, it would by no means have proved that the mammary induration was merely a symptom of neuralgia, it being quite as rational to look upon these pains as the result of the induration itself.

In most of the cases of Dr. Rufz the patients referred the origin of the affection under which they labored to a blow on the breast, generally received a long time previously.

*Medical Miscellany.*—A meeting of the Washington County Medical Society will be held at Montpelier, Vt., on the first Tuesday of January.—The seventh volume of the Medical Examiner, edited by Dr. Clymer, will be commenced early in January, to be published every alternate Saturday, at three dollars a year, invariably in advance.—The editor of the St. Louis Medical and Surgical Journal makes a very proper apology to his patrons for not having anything original in the last No; the selected matter, he says, being "as interesting and useful to a large majority of our readers, as original communications."—Victor J. Fourgeaud, M.D., of St. Louis, Mo., is preparing a work on Eclecticism in Medicine.—On the second Tuesday in January, the Windsor County Medical Society, of Vt., will meet at Woodstock, for the transaction of business.—A young Jewess was resuscitated at the grave, at St. Louis, who would have been interred directly had there not been discovered, opportunely, signs of life.—A Western paper states that as many as eight hundred cases of smallpox, mostly of a mild character, have occurred in Cincinnati the present winter.

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*Copper in Organic Tissues.*—M. Julius Rossignon, of Lyons, has lately addressed a communication to the Academy of Sciences, on the presence of copper in the organic tissues of a great number of vegetables and animals.

It is well known that MM. Danger and Flandin have endeavored in their last memoir to establish the non-existence of copper in the human body in its normal state. M. Rossignon proposes in his note to contradict their results, and to confirm the existence of copper in the healthy human body.

His experiments show that copper exists not only in the blood and muscular fibre of man, but in a great number of domestic animals, and in the vegetables on which they feed.

Experiments made on dogs in 1839, showed that copper existed in them. M. Dumas having mentioned in his lectures, that wheat contains an appreciable quantity of copper, which is absorbed by our digestive process, M. Rossignon was induced by his knowledge of this fact to continue his researches on the normal existence of copper in organized beings, and particularly in the elementary substances most used by man.

The following are some of the results to which M. Rossignon more particularly directs our attention.

The *gelatine* obtained by the philanthropic process of the *hopital St. Louis*, when carbonized in a close vessel, affords 0.03 of pure copper in 100 parts of carbon.

The *boiled sorrel* of the green-grocers affords as much as two per cent. of the neutral oxalate of copper.

*Ménier chocolate* affords carbon containing 0.07 of copper.

*Marquis chocolate* affords only 0.05.

Bread from the principal bakers in Paris gave from 0.05 to 0.08 of copper in 1000 parts of carbonized bread.

*Coffee* contains a few atoms of copper.

*Succory* affords more.

*Madder* contains a considerable quantity.

*Sugar* affords a carbon, which, when rigorously analyzed, furnishes copper, and sometimes lead.

*Barley-sugar* affords copper.

*Fecula sugar*, when carbonized, contains as much as four per cent. of copper.

Lastly, M. Rossignon says that since reading the memoir of MM. Danger and Flandin, he has found very small but appreciable quantities of copper in human semen, in the excrements of fowls, in eggs, and in the eye of the ox completely calcined in a close vessel.—*Gaz. Médicale*.

*Advantage of Medicines in a Liquid Form.*—It has been found that fifteen grains of sulphate of quinine, given in infusion of senna, is more efficacious as a tonic, notwithstanding the purgative quality of the mixture, than twenty-four grains of sulphate of quinine administered in the form of pills. Panizza supposes the causes of this to be that the senna, by promoting the peristaltic action of the alimentary tube, and augmenting the secretion of the bowels, excites the production of a fluid adapted perfectly to dissolve the quinine; and that the quinine in passing through the intestine in a state of solution, is placed in contact with a much larger extent of surface, and disposed for absorption much more readily than if taken in a solid form.—*Panizza, in L'Esperience*.